limitation of abduction. Other motions may or may not be limited. Pain may be present or absent. The diagnosis is made with the Roentgen rays.

In the past this disease has been mistaken for tuberculosis, but the X-ray picture is quite characteristic. The chief changes are on the joint side of the epiphyseal line in Legg's disease rather than on the shaft side. The flattening and segmentation of the head do not occur in tuberculosis.

Bony or fibrous ankylosis never forms in Legg's disease, nor cold abscess.

A good treatment is immobilization in plaster of Paris until the process has run its course. The hip should be put up in marked abduction, if necessary under ether.

Book Reviews

Elementary Bacteriology and Protozoology. By Herbert Fox. 222 pp. Illustrated. Third edition. Philadelphia and New York: Lea & Febiger. 1919. Price, \$1.75.

As a text book for nurses this manual contains all if not more than a nurse in training can assimilate. In fact, with the exception of brevity, it is not unlike the regular text books on the subject. Probably more space could be devoted to practical details, to the taking and handling of bacteriological specimens and to the modes of communication of infectious diseases. Why the author in writing a rather advanced treatise gives bacterial measurements in fractions of an inch I can not understand.

Surgical Clinics of Chicago. Volume III, Number 3 (June, 1919). Octavo of 287 pages, 118 illustrations. Philadelphia and London: W. B. Saunders Company, 1919. Published bi-monthly. Price, per year, paper, \$10.00; cloth, \$14.00.

R. L. Moodie: Studies in paleopathology; ancient lesions and the practice of trephining in prehistoric times. D. N. Eisendrath: Injuries of joints in war and in civil life. B. F. Davis: Cyst of the urachus. Gustav Kolischer and J. S. Eisenstaedt: Tumors of the urinary bladder. W. E. O'Neil: Persistent patent omphalmomsenteric duct. B. F. Louns-bury: Plastic repair of the heel. W. F. Hewitt: Indications for Caesarean section. V. D. Lespinasse: Sterility. W. M. Harsha: Fractures. T. J. nasse: Sterlity. W. M. Harsha: Fractures. 1. J. Watkins: Care of suppurating wounds following abdominal section. R. T. Vaughn: Hematoma of right rectus muscle. E. L. Moorhead: Stricture of esophagus. Gonorrheal spur on os calcis. C. E. Humiston: Demonstration of five cases. F. B. Moorhead and K. W. Dewey: Composite odontoma. G. L. McWhorter: Surgical treatment of empyema. A. F. Halstead: Diverticula of of empyema, A. E. Halstead: Diverticula of esophagus. Karl A. Meyer and W. F. Moncreiff: Volvulus. A. J. Ochsner: Umbilical hernia. Intestinal festula. tinal fistula. Excision of coccys and repair of ventral hernia. Carl Beck: Extensive osteomyelitis with necrosis of tibia. Carcinoma of upper eyelid. Webbed fingers. Dr. Gatewood: Duodenal ulcer. A. D. Bevan: Obstruction of common bile-duct. Brodie abscess. Rodent ulcer of face. Pilonidal cyst. Gastrotomy on baby for removal of open Tumor of urinary bladder. Amebic safety-pin. abscess of liver.

The Medical Clinics of North America. Volume III, Number 1. (The Chicago Number, July, 1919.) Octavo of 277 pages, 59 illustrations. Philadelphia and London: W. B. Saunders Company, 1919. Published bi-monthly. Price per year, paper, \$10.00; cloth, \$14.00.

I. A. Abt: Prognosis of disease in infancy and childhood. Case of Hanot's cirrhosis in a twoyear-old child. Frederick Tice: Mediastinal tumor. Carcinoma of stomach. J. H. Hess: Radiographic differential diagnosis of bone and affections in infancy and childhood. M. M. Portis: Unusual case of carcinomatous metastases in bones secondary to carcinoma of stomach. Acute pyelitis simulating intestinal obstruction. Carcinoma of esophagus treated with radium. R. C. Hamill: Case of cerebral lues to be differentiated from encephalitis lethargica. Neurologic findings in a case of ethmoiditis. Consideration of causes of apprehension. C. G. Grulee: Pyelocystitis in infancy. Solomon Strouse: Pulmonary tuberculosis with gastrointestinal symptoms. Pulmonary tuberculosis and hyperthyroidism. Case of belladonna poisoning. C. S. Williamson: Malignant endocarditis of pulmonary valves. Gout. Peter Bassoe: Swift-Ellis treatment of paretic dementia. W. D. Sansum: Treatment of constipation. G. F. Dick: Unusual case of typhoid fever. J. G. Carr: Cardiac arrhythmias. Case of syphilitic periositis of humerus. Pulmonary abscess following tonsillectomy. A. F. Byfield: Some aspects of Hodgkin's disease. R. J. Tivnen: Eye findings as an aid to diagnosis of general conditions; a suggestion for team-work. Robert Sonnenschein: Some interesting ear cases. W. W. Hamburger: Irregular placement and fixation of large bowel. Frank Wright: Consideration of abnormal loss of fluid in contrast with edema.

Quarterly Medical Clinics. Volume I, number 2. (April, 1919.) 219 pages. Illustrated. Published quarterly. St. Louis: Medicine and Surgery Publishing Company. 1919. Price per year, \$5.00.

Epidemic encephalitis, chronic, non-active, peptic ulcer. Thrombosis of cerebral arterioles and myo-cardial inefficiency producing epileptiform attacks; infected tonsils and roots of the teeth. Myocardial weakness, cardiac dilatation, "paroxysmal tachycar-dia," pulmonary edema, severe, "secondary" anemia, abscesses of the roots of the teeth and obesity. Peptic ulcer complicated by recent gastrorrhagia; lues. Tertiary lues: gummata of the stomach and lues. Tertiary lues; gummata of the stomach and Charcot's knee. Anemia of "hemolytic" or "pernicious" type consequent upon chronic lead poisoning: arteriosclerosis; myocardial hypertrophy and degeneration; infection of gums and about the roots of the teeth. Malnutrition of extreme degree; gastrorrhagia and melena neonatorum. Common bileduct obstruction due to pancreatic cirrhosis; pyloric obstruction with pronounced dilatation of stomach; chronic cholecystitis. Obstruction of sigmoid portion of colon due to tumor of inflammatory type arising from sigmoid diverticula. Deep urethral obstruction caused by carcinoma of prostate resulting in enormous dilatation of urinary bladder; general arteriosclerosis, with arterial hypertension, cardiac hypertrophy and interstitial nephritis; chronic pan-Chronic ulcerative enterocolitis in assocreatitis. ciation with amebiasis, cercomoniasis and tricho-moniasis; chronic splenitis; anemia; focal infec-tions in head sinuses and mouth. General arteriosclerosis; aneurysmal dilatation of thoracic aorta; arterial hypertension; myocardial hypertrophy and dilatation; cerebrospinal lues. Advanced "hemolytic" or "pernicious" anemia; abscesses of the roots of the teeth; chronically infected appendix and gallbladder; splenitis and perisplenitis.